



Metropolitan Educational Council  
Data Release Form

The \_\_\_\_\_ School District (District) hereby authorizes the Metropolitan Educational Council (MEC) to release the specified District data to the requesting entity below. The specified data is indicated on the attached sheet. This release authorization will be in effect for the school year \_\_\_\_\_. The District acknowledges that MEC is not responsible for the accuracy or security of the data.

Authorized Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Requesting Entity (RE) Contact Information:

Name of Requesting Entity: \_\_\_\_\_

Name of Contact: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

- 1) How will the RE receive the data?  
 RE will retrieve the data (pull).  MEC will push the data to the RE.  Physical Media
- 2) What security method will be used to protect data transmission?  
 SFTP  FTPS  HTTPS (Pull Only)  FTP/SSL (Push Only)
- 3) Frequency of data delivery?  
 Daily  Weekly  Monthly

If weekly or monthly, please indicate the day of the week or date (monthly) desired:

\_\_\_\_\_

- 4) Requested time of day the data will be available: \_\_\_\_\_